PROVIDER BULLETIN

MOLINA HEALTHCARE

A bulletin for the Molina Healthcare of Ohio provider networks

"It Matters to Molina" Corner
Information for all network providers

Thank you for the wonderful response to the "It Matters to Molina" question! Our winner is Victoria Hayes from Life Long Transportation.

The October "It Matters to Molina" question answer is "6." Which of the following items are new or have been recently updated on our Provider Website?
1. New Provider Online Directory
2. Updated Prior Authorization (PA) Request Form
3. New PA Code List
4. New Nursing Facility Request Form
5. Updated Managed Care Plan (MCP) Consolidated Resources
6. **All the above**

November Question: By what date are Medicare medical providers required to complete the annual Model of Care (MOC) training and submit an attestation form to Molina?
1. Nov. 30, 2021
2. Dec. 31, 2021
3. Jan. 31, 2022
4. Feb. 28, 2022

Email your answer to OHProviderBulletin@MolinaHealthcare.com by Nov. 15 to enter the drawing. The correct answer and drawing winner will be announced in the December Provider Bulletin.

In addition to participating in the monthly drawings, we want to hear from you. Please take time to share feedback with us about your experience working with Molina. Your feedback is important, and It Matters to Molina.

COVID-19: Vaccine Administration Rate for Additional Dose
Information for all network providers

Beginning Mon., Nov. 1, 2021, as part of the provider enhanced reimbursement program for vaccinations, Ohio Managed Care Plans (MCPs) have extended the $100 vaccination **administration fee to include __all doses__** of the Pfizer-BioNTech, Johnson & Johnson's Janssen, and Moderna COVID-19 vaccinations. Providers will now receive $100 for each vaccination dose given between Nov. 1 and Dec. 31, 2021 dates of service.

Find the Current Procedural Terminology (CPT) codes below:

First Dose
- **0001A:** Pfizer-BioNTech
- **0011A:** Moderna
- **0031A:** Johnson & Johnson's Janssen

Second Dose
- **0002A:** Pfizer-BioNTech
- **0012A:** Moderna

Third Dose
- **0003A**: Pfizer-BioNTech

Questions and Quick Links
Provider Services – (855) 322-4079 8 a.m. to 5 p.m., Monday to Friday (MyCare Ohio available until 6 p.m.)

Email us at OHProviderRelations@MolinaHealthcare.com

Visit our Provider Website at MolinaHealthcare.com/OhioProviders
- Provider Manual
- PA Code List
- PA Request Form
- Provider Bulletin Archive
- It Matters to Molina Page
- Molina Provider Portal
- Availity Provider Portal

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How to Join WebEx
To join WebEx, call (404) 397-1516 and follow the instructions. To view sessions, log into WebEx.com, click on "Join" and follow the instructions. Meetings passwords are case sensitive. For trouble connecting to a Molina training, email Molina at OHProviderRelations@MolinaHealthcare.com and we'll assist you with getting connected immediately.

The Provider Bulletin is a monthly newsletter distributed to all network providers serving beneficiaries of Molina Healthcare of Ohio Medicaid, Medicare, MyCare Ohio and Health Insurance Marketplace health care plans.

- **0013A**: Moderna
Booster
- **0004A:** Pfizer-BioNTech
- **0054A:** Pfizer
- **0064A:** Moderna
- **Johnson & Johnson's Janssen**

For additional information, and a complete list of active vaccination CPT codes, visit www.cms.gov and on the Medicare page, select Medicare Part B Drug Average Sales Price, then the COVID-19 Vaccines and Monoclonal Antibodies on the left-hand side.

Ohio MCPs will pay the additional $100 for participating and non-participating providers for the first, second, third, and booster doses provided **between Nov. 1 and Dec. 31, 2021.** The increase of the administration fee includes all professional claims. Federally qualified health clinics (FQHCs) and rural health clinics (RHCs) are also included in the administration fee increase and will be paid following the same reimbursement process as given in the June COVID-19: FQHC, QFPP and RHC Provider Vaccine Administration Fee Increase Provider Bulletin, located on the Molina Provider Website, under the "Communications" tab, on the "Provider Bulletin" page. However, it does not apply to the following providers and/or claims:

- Hospital
- ACS
- Pharmacies
- Emergency Rooms
- Hospital Clinics
- Dialysis Centers
- EAPG and DRG claims
- SNF claims
- LTAC claims

Payments will be notated by the following CARC and RARC codes:
- **CARC code:** 144 – incentive adjustment (e.g., preferred product/service)
- **RARC code:** MA125 – per legislation governing this program, payment constitutes payment in full

Please note that while it is not required, we encourage you to bill the vaccine and the administration code together for reporting purposes. You will need to bill one vaccine code and one administration code per dose of the vaccine administered. **At this time there will be no reimbursement for the vaccine, only the administration fee.**

Providers will have until March 1, 2022 to submit claims for administration of the initial vaccination to receive the bonus payment (regardless of FQHC status).

For questions, please reach out to the Provider Services Team at OHProviderRelations@MolinaHealthcare.com.

Notice of Changes to the Provider Manual
Information for MyCare Ohio and Medicare providers

On Oct. 29, 2021 Molina updated the 2021 Medicare and Medicaid and MyCare Ohio Combined Provider Manuals with an Addendum page at the front of the manual to ensure compliance with Executive Order 14042, as it pertains to COVID-19 (Coronavirus). View the provider manuals on our Molina Provider Website.

Provider Training Sessions
Information for all network providers
It Matters to Molina Forums:
- Medicaid and Marketplace Authorization and Claim Reconsideration Guide on Thurs., Nov. 18, 10 to 11 a.m., meeting number 2457 111 8694, password mWBrEaj3n68
- Pharmacy Services/Provider Initiatives on Wed., Dec. 1, 10 to 11 a.m., meeting number 2454 013 8157, password cY3FwpqMu87

Model of Care Training Session:
- Fri., Nov. 12 10:30 to 11:30 a.m., meeting number 133 062 6357, password 4ytNUxFqm37

General Provider Orientation:
- Fri., Jan. 7, 1:30 to 2:30 p.m., meeting number 2453 306 0680, password jrEt3TKFW32

To join WebEx, follow the instructions in the "How to Join WebEx" article.

Website Roundup
Recently updated documents and webpages include:
- Nursing Facility Request Form
- SUD PA Request Form
- Authorization Reconsideration Request Form

Notice of Changes to Prior Authorization (PA) Requirements
Information for all network providers

Molina posts new comprehensive PA Code Lists to our website quarterly. However; changes can be made to the lists between quarterly comprehensive updates. Always use the lists posted to our website under the Forms tab instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions of Molina's PA requirements.

Disabling Electronic Visit Verification (EVV) Exception
Information for impacted home and community-based service providers who will bill the following codes: G0151, G0152, G0153, G0156, G0299, G0300, S5125, T1000, T1001, T1002, T1003, T1019 and T2025

As a result of feedback from the Technical Small Group that met earlier this year, ODM has discontinued the Unmatched Client Phone/ID exception as of Oct. 6. This exception was

Reminder: Molina posts a new comprehensive Provider Manual to our website semi-annually. However, changes can be made to the manual between comprehensive updates. Always refer to the manual posted on our website under the Manual tab instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions of Molina's Provider Manual.

2021 Open Enrollment
Information for all network providers

Medicaid and MyCare Ohio: The Medicaid and MyCare Ohio Opt-Out open enrollment period began on Sept. 17, 2021 and will end on Dec. 31, 2021.

During this time members are able to:
- Select their plan by calling the Ohio Medicaid Consumer Hotline at (800) 324-8680 or at https://members.ohiomh.com/Login.aspx
- If a member does not wish to change their current plan, then no action is required

Marketplace: The Marketplace open enrollment period begins on Nov. 1, 2021 and will end on Jan. 15, 2022.

Medicare: The Medicare open enrollment period began on Oct. 15, 2021 and will end on Dec. 7, 2021.

Reminder: Medicaid Enrollment Requirements
Information for Medicaid network providers

As of Aug. 15, 2021, any provider who is not enrolled and noted as "active" in Medicaid Information Technology System (MITS) will receive denials for claims submitted to Molina. Claim denials will continue until the provider's Medicaid enrollment is noted as an "active" status.

Note: Providers who update their records after claims begin rejecting, will need to submit corrected claims once the records are updated.
For additional information in response to provider questions regarding this communication, please see the details in the September Provider Bulletin.

Electronic PRAF Modifier Update
Information for Medicaid and MyCare Ohio providers

Effective Dec. 1, 2021, modifier TH should no longer be used when coding Healthcare Common procedure Coding System (HCPCS) H1000 for an Electronic Pregnancy Risk Assessment Form (PRAF). Providers should instead be utilizing modifier 33. This update is based on guidance from the Ohio Department of Medicaid (ODM)'s update to Ohio Administrative Code (OAC) 5160-1-60: Medicaid payment, Appendix DD.

	Original Coding Guidance	Corrected Coding Guidance	Rate
Electronic PRAF	H1000 + TH modifier	H1000 + 33 modifier	$90
Non-Electronic PRAF	H1000	N/A	$12.10

The Electronic PRAF is available on the Molina Provider Website, under the "Health Resources" tab, on the "Pregnancy Resources" page.

attached to visits where a telephone call was made from a phone number that did not match to the individual in the Sandata system.

Providers will not see this exception in the Sandata portal on visits that take place after Oct. 6, 2021; however, providers will still need to acknowledge the exception for visits that took place prior to Oct. 6, 2021.

Data Accuracy for Electronic Visit Verification (EVV) Providers
Information for impacted home and community-based service providers who will bill the following codes: G0151, G0152, G0153, G0156, G0299, G0300, S5125, T1000, T1001, T1002, T1003, T1019 and T2025

As a reminder, Electronic Visit Verification (EVV) providers must ensure any changes to provider information is submitted to Molina for system updates via the Provider Information Update Form, located on the Provider Website, on the Forms page. This data validation is necessary to ensure accuracy of matching claim data information when claims are sent to Sandata for verification. If Molina has not received the correct information from the provider, the claim will not match to a verified visit in Sandata, and providers will receive a letter from ODM noting visits are not recorded appropriately within the Sandata Aggegator. Please contact your Provider Services Team if you have any questions.

Managing Implicit Bias and Maternal Health Training
Information for Medicaid and MyCare Ohio women's health providers

The Ohio Department of Health (ODH) is conducting free Managing Implicit Bias and Maternal Health trainings, hosted by the Pregnancy Associated and Mortality Review (PAMR) program. Participants in this training will take a Cultural Intelligence (CQ®) assessment before and after training to determine what skills they need in order to improve their culturally intelligent strategies. Results are confidential and for the personal use of participants and aggregate analysis.

Please click on the below links to register for the Zoom meeting:

As a reminder, the Report of Pregnancy (ROP) Form should be submitted along with the PRAF.

Code + modifier	Description	Fee Schedule Amount
HCPCS **T1023**	Report of Pregnancy (ROP) electronic submission	$30

Submitting the ROP using NurtureOhio:
- Open the NurtureOhio website to access the PRAF: http://www.nurtureohio.com
- Instructions can be found at: http://medicaid.ohio.gov/Provider/PRAF
- Users must be registered in the Medicaid Information Technology System (MITS). For username or password issues: http://www.ohmits.com/
- Difficulties with NurtureOhio, email: Progesterone_PIP@medicaid.ohio.gov

For additional information on the ROP, read the "Women's Health: Report of Pregnancy Form" article in the Q2 Quality Provider Bulletin.

Updated: Ordering, Referring and Prescribing Providers NPI
Information for all network providers

As of July 1, 2021, Molina requires the billing of Ordering, Referring and Prescribing (ORP) providers based upon the requirements developed by the ODM in compliance with federal regulations 42 CFR 438.602 and 42 CFR 455.410. Claims billed with the attending field information will also be used to satisfy the ORP requirements.

For providers with notable ORP billing errors, Molina will be reaching out to address and educate. Molina will continue to share updates on these billing requirements in future Provider Bulletins. In November, Molina's system will include the following CARC/RARC remit messaging:

Scenario	Referring	Ordering	Attending
Remit	N286	N265	N253
CARC	16	16	
CARC Description	Claim/service lacks information or has submission/ billing error(s)	Claim/service lacks information or has submission/ billing error(s)	Missing/ incomplete/invalid attending provider primary identifier
RARC	N286	N265	N253
RARC Description	Missing/ incomplete/invalid referring provider primary identifier	Missing/ incomplete/invalid referring provider primary identifier	Missing/ incomplete/invalid referring provider primary identifier

Consistent with these rules, a valid National Provider Identifier (NPI) will be required on claims for select ORP provider types which are eligible to order, refer or prescribe including:

Hospital	Independent Diagnostic Testing Facility
Psychiatric Hospital	Waivered Services Organization
Nursing Facility	Medicare Certified Home Health Agency
Professional Medical Group	Other Accredited Home Health Agency
Hospice	OMHAS Certified/Licensed Treatment Program

- Tues., Nov. 30, 9 a.m. to 3:30 p.m. Register at https://www.eventbrite.com/e/november-30-2021-managing-implicit-bias-and-maternal-health-registration-167761084921
- Wed., Dec. 8, 9 a.m. to 3:30 p.m. Register at https://www.eventbrite.com/e/december-8-2021-managing-implicit-bias-and-maternal-health-registration-167761295551
- Tues., Jan. 11, 9 a.m. to 3:30 p.m. Register at https://www.eventbrite.com/e/january-11-2022-managing-implicit-bias-and-maternal-health-registration-167761379803

ODH will award 3.91 contact hours to nurses and social workers who attend 100% of one of the sessions and submit their evaluations.

Value Code 80 & 81: Missing/ Invalid Covered Days
Information for Inpatient and Long-Term Care providers in all LOBs

Value code 80 (Covered Days) must be present on inpatient and long-term care claims or the claims will be denied. Institutional (UB) outpatient services are excluded from this requirement.

Claims with non-covered days must bill value code 81 (Non-Covered Days) to indicate the total number of full days that are not reimbursable.

As a reminder:
- If the covered and non-covered days' values are not reported on separate lines, the claim will be denied
- The total covered days and non-covered days billed must match at the line and header level
- This process must be followed by the provider for billing collapsed preventable readmissions

For additional information read the "Updated: Value Code 80 & 81: Missing/Invalid Covered Days" article in the February Provider Bulletin, located on the Provider Bulletin page of the Provider Website, under the Communications tab.

Pharmacy	Psychiatric Residential Treatment Facility
FQHC	Certified OH Behavioral Analyst
Clinic	Occupational Therapist Individual
Independent Laboratory	Certified RN Anesthetist Individual
Waivered Services Individual	Durable Medical Equip Supplier
Audiologist Individual	Speech Language Pathologist
Anesthesia Assistant Individual	Ohio Department of Mental Health Provider
Physical Therapist Individual	Non-Agency Personal Care Aide
Wheelchair Van	Non-Agency Nurse – RN or LPN
Portable X-Ray Supplier	Non-Agency Home Care Attendant

Molina Quality Living Program Awardees
Information for all network providers

Molina is proud to announce the most recent quarter's performance for nursing facilities in the Molina Quality Living Program.

Level	Nursing Facility
Platinum Level	Crown Pointe Care Center
	Siena Gardens
	Guardian Elder Care at Columbus
Gold Level	Quaker Heights Care Community
	Friends Care Community
Silver Level	Darby Glenn Nursing Center
	Diversicare of St Theresa
	Loveland Healthcare Center
	Respiratory and Nursing Center of Dayton
	Venetian Gardens
	Widows Home of Dayton

Reminder: The Molina Quality Living Program recognizes and awards nursing facilities that meet or exceed select Centers for Medicare and Medicaid Services (CMS) quality measures when providing care to Molina MyCare Ohio members in custodial care.

Molina Clinical Practice and Preventive Health Guidelines
Information for all network providers

Molina has posted new and updated Clinical Practice Guidelines and Preventive Health Guidelines on the Molina Provider website under the "Health Resources" tab.

New Clinical Practice Guidelines include:
- Autism: Identification, Evaluation, and Management of Children with Autism Spectrum Disorder
- Homelessness: Special Health Care Needs

Revised Preventive Health Guidelines include:
- Adult Preventive Services Recommendations: Screening for Prediabetes and Type 2 Diabetes

Annual Mandatory Medicare Model of Care Training
Information for providers in the Medicare network

CMS requires contracted Medicare medical providers complete a basic training on the Dual Eligible Special Needs Plan (D-SNP) Model of Care (MOC) by Dec. 31, 2021. Providers only participating in the Medicaid,

Submitting Professional Claims When the Billed Amount Exceeds $99,999.99
Information for Medicaid, MyCare Ohio and Medicare providers

Per the CMS Standard Companion Guide Health Care Claim: Professional (837P), the maximum number of characters in any dollar amount field is seven characters. Claims containing a dollar amount in excess of $99,999.99 will be rejected. When a claim has services that exceed $99,999.99, the claim is to be submitted on separate claims.

For additional information read the full "Submitting Professional Claims When the Billed Amount Exceeds $99,999.99" article in the September Provider Bulletin, or by reading section "7.2 General Transaction Notes," at https://www.cgsmedicare.com/pdf/edi/837p_compguide.pdf, starting on page 14 of the Standard Companion Guide Health Care Claim: Professional (837P).

Managed Care Plan Consolidated Resources
Information for Ohio CPC Practices

Molina and the other Ohio MCPs continue to collaborate on simplifying the work of our Ohio Comprehensive Primary Care (CPC) practices by offering consolidated resources. Recently, the MCPs worked to include additional documents to create a quick tool for our practices to have for easy reference. This includes:
- 2021 Ohio CPC practice roster with Lead MCP assignments
- MCP Primary Care Change form
- MCP Transportation overview
- MCP coverage of well and sick visits, on the same day
- MCP consolidated resource guide, by plan
- Behavioral Health (BH) Virtual Pediatric office hours

Molina has posted the latest version of the Ohio CPC – Managed Medicaid Consolidated Plan Resource Guide on the Provider Website, under the Health Resources tab. Recommendations for additional resources are welcome as the MCPs work to continue to make helpful improvements

MyCare Ohio and Marketplace LOBs <u>do not</u> need to complete this training. Provider types who must complete training include the following:

- Primary Care Provider (PCP): all specialties for PCP Physicians
- Cardiologists: Cardiovascular Disease/Cardiovascular Diseases, Interventional Cardiology, Cardiology, Cardiology – Interventional & Hypertension Specialist
- Pain Management: Pain Medicine, Interventional Pain Medicine, Pain Medicine – Pain Medicine
- Psychiatry: Child and Adolescent Psychiatry, Geriatric Psychiatry, Psychiatry

WebEx Training: Molina will be hosting monthly MOC provider training sessions to help train you and your staff, and address questions. To join WebEx, follow the instructions in the "How to Join WebEx" article.

- Fri., Nov. 12 10:30 to 11:30 a.m., meeting number 133 062 6357, password 4ytNUxFqm37

Online Training: Our online training is available on the MyCare Ohio Provider website, under the "Communications" tab, on the "Resources & Training" page. Select the "2021 Model of Care Provider Training." After reviewing the training, providers should complete and submit the "OH MOC Attestation Form" located in the "Select State Form" drop-down menu.

New in 2021, individual providers can fill out and submit the OH MOC Attestation Form online. If one provider is willing to sign off for a group or clinic, the provider <u>should not</u> fill out and submit the OH MOC Attestation Form online, instead the provider must:

1. Export the OH MOC Attestation Form using the "Export to PDF" button on the Provider Website
2. Fill out an Excel spreadsheet of all the providers in the clinic/group and include:
   - Name of the provider giving the training
   - Clinic/Practice name
   - Clinic/Practice address
   - Tax Identification Number (TIN)
   - The method used to train office staff and providers
   - Date the office staff and providers were trained
   - Date the office staff and providers sign the attestation
3. Email the completed OH MOC Attestation Form and Excel spreadsheet to OHAttestationForms@MolinaHealthcare.com

Find additional information in the Model of Care Provider Bulletin on the Provider Website, under the "Communications" tab.

Diabetes Self-Management Education for Medicaid
Information for all Medicaid network providers

Effective June 1 through December 31, 2021, Molina has added the Diabetes Self-Management Education (DSME) value-added benefit for Medicaid members with diabetes. Eligible members will have access to up to 10 hours of initial training. DSME is provided by educators in an American Diabetes Association (ADA)-recognized and/or Association of Diabetes Care and Education Specialists (ADCES)-accredited program.

For additional details, read the "Diabetes Self-Management Education for Medicaid" article in the October Provider Bulletin on our Provider Website.

Fighting Fraud, Waste & Abuse
Information for all network providers

Do you have suspicions of member or provider fraud? The Molina AlertLine is available 24 hours a day, 7 days a week, even on holidays at (866) 606-3889. Reports are confidential, but you may choose to report anonymously.